NON-PROVISIONAL UTILITY PATENT APPLICATION TRANSMITTAL - 37 CFR 1.53(b)

(check, if applicable)

MAIL STOP PATENT APPLICATION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

which is:

Attorney Docket No.: 9976-18US (OB0042US)
First Named Inventor: Osamu IZAKI
Express Mail Label No.: EV199928122US
Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the non-provisional utility patent application entitled:

PRINT CONTROL METHOD AND PRINTING APPARATUS

an	[X]	Original; or	2					
a		Continuation, [] Divisional, or [] Continuation-in-part (CIP) or Application No filed						
	Antici	pated Group/Art Unit: or Class, Subclass						
[]		on-provisional patent application is based on Provisional Patent Application No. iled						
Enclo	sed are:							
	[X] Specification (including Abstract) and claims: 51 pages.							
	[X] 30 sheets of drawings (formal).							
	[] Application Data Sheet.							
[X] Newly executed Declaration (copy).								
	Copy of Declaration from prior application.							
[] Separate Power of Attorney (including 37 CFR 3.73(b) statement, if a								
	[] Microfiche computer program (Appendix).							
[] Nucleotide and/or Amino Acid Sequence Submission, including:								
		[] Computer readable copy [] Paper Copy [] Verified Statement.						
	[X]	Under PTO-1595 Cover Sheet, an assignment of the invention						
	[X]	Name of Assignee: Oki Data Corporation						
	[X]	Certified copy of Japanese Application No. 2002-235578 filed August 13, 2002 if filed: [X] herewith or [] in prior application	.S					
	[]	Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status unde 37 C.F.R. §1.27 as [] an Independent Inventor, or [] a Small Business Concern or [] a Non-Profit Organization.						
	[]	Preliminary Amendment.						
	[]	Information Disclosure Statement, PTO/SB/08A, and cited references.						
	[]	Request for Nonpublication of Application Under 35 U.S.C. §122(b)						
	[]	Other:						



The filing fee is calculated as follows:

			SMAI	LL ENTITY		LAR	GE ENTITY
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$375			BASIC FEE: \$750`	
Total	17-20 =	0	X9	\$	OR	X18	\$
Independent	2 – 3 =	0	X42	\$	OR	X84	\$
[] Multiple Dependent Claims Present			\$140	\$	OR	\$280	\$
			TOTAL	\$	OR	TOTAL	\$ 750.00

[]	The Commissioner is not authorized to charge the filing fee at this time as we
	elect to defer payment of the entire filing fee until receipt of a Notice to File
	Missing Parts

- [X] A check in the amount of \$_750_.00 to cover the filing is enclosed.
- [X] The Commissioner is hereby authorized to charge and/or credit **Deposit Account** No. 50-1017 (Billing No. 209976.0018) as noted below. A duplicate copy of this sheet is enclosed.

[X]	Any overpayments	or deficiencies	in the above	-calculated fee
IAI	Any overdayments	of deficiencies.	iii liie addve	-caiculateu lee

- [] Filing fee in the amount of \$_____ as calculated above.
- [X] Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
- [X] In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

August 4, 2003

JDS/vi

JOHN D. SIMMONS

Registration No. 52,225

AKIN GUMP STRAUSS HAUER & FELD LLP

One Commerce Square

2005 Market Street, Suite 2200 Philadelphia, PA 19103-7013 Telephone: 215-965-1200 **Direct Dial: 215-965-1268**

Direct Dial: 215-965-1268Facsimile: 215-965-1210

Enclosure E-Mail: jsimmons@akingump.com

[X] Customer Number or Bar Code Label: 000570